

BEST AVAILABLE COPY

CLAIMS ONLY						Application Number 109039607	Filing Date
						Applicant(s)	
* May be used for additional claims or amendments							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
1	/		1				
2		1		1			
3							
4		1					
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6		1					
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47							
48							
49							
50							
Total Indep			7				
Total Depend			25				
Total Claims			32				

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